

**HOME AND COMMUNITY BASED CARE WAIVERS:
ELDERLY OR DISABLED WITH CONSUMER DIRECTION WAIVER**

DESCRIPTION

Elderly or Disabled with Consumer Direction (EDCD) Waiver became effective February 1, 2005. It is the combination of two waivers, the Elderly and Disabled and the Consumer-Directed Personal Attendant Services Waivers. These two waivers ended on January 31, 2005. Five alternative services are provided under this waiver to the elderly and persons with disabilities who are eligible for institutional placement under the Medicaid Program. To receive the services under the EDCD Waiver, individuals must meet the waiver's target population. The target population includes those individuals who (1) meet the nursing facility level of care criteria (i.e., they are functionally dependent and require medical and nursing supervision of care), (2) are determined to be at risk of nursing facility placement and for whom community-based care services under the waiver are the critical services that enable the individual to remain at home rather than being placed in a nursing facility. Community-based care services under the waiver cannot be offered to individuals unless it can reasonably be expected that the individual would, without those services, enter a nursing facility. Provision of home and community-based care must be determined by a Pre-Admission Screening Team to be a medically appropriate, cost-effective alternative to institutionalized care. Individuals may not receive services under any other home and community-based waiver while receiving services under this waiver. The waiver year runs concurrently with the state fiscal year.

WAIVER INFORMATION¹

Service	Covered Services	Excluded Services	Pre-Screening and Authorization	Billing	Current Rates	
					NOVA	ROS
Personal Care	Services of personal care aides who assist with the recipient's activities of daily living such as bathing, dressing, transferring, ambulating and meal preparation. Can be agency-directed or consumer-directed.	<ul style="list-style-type: none"> • Transportation services. • Skilled services requiring professional skills or invasive therapies. • Services provided to other members of the household 	Pre-Screening completed by a Preadmission Screening Team. Preauthorization contractor authorizes services.	Reimbursement is made for the number of hours that the personal care aide rendered for the recipient.	<u>Agency-directed:</u> \$14.05/hour <u>Consumer-directed:</u> \$10.61/hour	<u>Agency-directed:</u> \$11.93/hour <u>Consumer-directed:</u> \$8.19/hour
Respite Care	Reimbursement for personal care aides or LPNs who perform personal care and skilled care and other activities.. Differs from Personal Care in that the goal is for the relief of the caregiver. Services are limited to 720 hours per calendar year. Can be agency-directed or consumer-directed.	<ul style="list-style-type: none"> • Transportation services. • Skilled services requiring professional skills or invasive therapies. • Services provided to other members of the household 	Pre-Screening completed by a Preadmission Screening Team. Preauthorization contractor authorizes services.	Reimbursement is made for the number of hours the recipient received respite care.	<u>Agency-directed:</u> Aide: \$14.05/hour LPN: \$26.00/hour <u>Consumer-directed:</u> Aide: \$10.61/hour	<u>Agency-directed:</u> Aide: \$11.93/hour LPN: \$21.45/hour <u>Consumer-directed:</u> Aide: \$8.19/hour
Adult Day Health Care	Services offered to recipients in a congregate daytime setting where a group of professionals and aides provide personal care, socialization, nursing, rehabilitation, and transportation services.	Skilled services requiring professional skills or invasive therapies.	Pre-Screening completed by a Preadmission Screening Team. Preauthorization contractor authorizes services.	Reimbursements are made for the number of days that the recipient attended the ADHC based on a per-diem reimbursement rate. A day is defined as 6 hours or more. Attendance of less than 6 hours must be billed as ½ day.	\$47.25/day \$43.05/day Transportation: \$2.00 per trip/one-way	
Personal Emergency Response System (PERS)	An electronic device that enables certain recipients at high risk of institutionalization to secure help in an emergency through the provision of a two-way voice communication system that dials a 24-hour response or monitoring center upon activation and via the recipient's home telephone line.	A recipient cannot receive supervision hours on the plan of care.	Pre-Screening completed by a Preadmission Screening Team. Preauthorization contractor authorizes services.	Reimbursements for a one-time installation and a monthly monitoring fee.	<u>Installation:</u> \$59.00/hour <u>Monthly Monitoring:</u> \$35.40/hour	<u>Installation:</u> \$50.00/hour <u>Monthly Monitoring:</u> \$30.00/hour

Continued

HOME AND COMMUNITY BASED CARE WAIVERS:
ELDERLY OR DISABLED WITH CONSUMER DIRECTION WAIVER

(Continued)

Page 12 - 45

WAIVER INFORMATION, CONT.					
Service	Covered Services	Excluded Services	Pre-Screening and Authorization	Billing	Current Rates NOVA ROS
PERS Medication Monitoring	An electronic device that enables certain recipients at high risk of institutionalization to be reminded to take their medications at the correct dosages and times.		Pre-Screening completed by a Preadmission Screening Team. Preauthorization contractor authorizes services. A recipient must have the PERS unit to qualify.	Reimbursements for a one-time installation, a monthly monitoring fee, and a nurse to fill the unit with medication.	<div> Installation: \$88.50/hour </div> <div> Monthly Monitoring: \$59.00/hour </div> <div> RN Services: \$15.00/15min </div> <div> LPN Services: \$13.00/ 15min </div> <div> Installation: \$75.00/hour </div> <div> Monthly Monitoring: \$50.00/hour </div> <div> RN Services: \$12.25/15min </div> <div> LPN Services: \$10.25/ 15min </div>
Consumer-Directed Services Facilitation	Responsible for monitoring the ongoing provision of CD services.	A recipient with a severe cognitive impairment, as defined by DMAS, must have a primary caregiver manage his/her care and employee.	Pre-Screening completed by a Preadmission Screening Team. Preauthorization contractor authorizes services.	Services Facilitation is billed using procedure codes to indicate the type of service provided.	<div> Comprehensive Visit: \$219.45 </div> <div> Routine Visit: \$68.25 </div> <div> Reassessment Visit: \$110.25 </div> <div> Consumer Training: \$218.40 </div> <div> Management Training: \$27.30 </div> <div> Criminal Record Check: \$15.00 each </div> <div> CPS Registry: \$5.00 each </div> <div> \$169.05 </div> <div> \$52.50 </div> <div> \$84.00 </div> <div> \$168.00 </div> <div> \$21.00 </div>

Continued

HOME AND COMMUNITY BASED CARE WAIVERS:
ELDERLY OR DISABLED WITH CONSUMER DIRECTION WAIVER

(Continued)

Page 12 - 46

RECIPIENT AND PAYMENT DATA^{2,3}

	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005
Agency-Directed Personal Care										
Number of Recipients										10,936
Payments										\$110,272,657
Cost per Recipient										\$10,083
Consumer-Directed Personal Care										
Number of Recipients										751
Payments										\$7,535,619
Cost per Recipient										\$10,034
Agency-Directed Respite Care										
Number of Recipients										4,292
Payments										\$15,672,641
Cost per Recipient										\$3,652
Consumer-Directed Respite Care										
Number of Recipients										75
Payments										\$54,622
Cost per Recipient										\$728
Adult Day Health Care										
Number of Recipients										599
Payments										\$3,104,801
Cost per Recipient										\$5,183
PERS										
Number of Recipients										717
Payments										\$298,072
Cost per Recipient										\$416
PERS Medication Monitoring										
Number of Recipients										0
Payments										\$0
Cost per Recipient										\$0
CD Services Facilitation										
Number of Recipients										751
Payments										\$210,075
Cost per Recipient										\$280
TOTAL SERVICES										
Number of Recipients										11,901
Payments										\$137,148,487
Cost per Recipient										\$11,524

Notes:

(1) EDCD Waiver Services Manual.

(2) Recipient and expenditures data sources include the CMS 372 Report series "Annual Report on Home and Community-Based Waivers", the DMAS CD Payroll database, and claims summary information from off-line payments.

(3) FY 2005 reflects E&D and CDPAS waivers from 7/04 through 1/05; EDCD waiver from 2/05 through 6/05.

File: EDCD-WVR-05.xls
Date: January 12, 2005
Originator: Jeff Beard